

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

195617US0X

First Inventor or Application Identifier

Sachiko MACHIDA, et al.

Title

ARTIFICIAL CHAPERON KIT

PTO
JCS62 U.S.
09/635429

08/10/00

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. ☒ Specification

Total Pages

28

3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets

2

(Formals)

4. ☒ Oath or Declaration

Total Pages

3

- a. ☒ Newly executed (original)

- b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation/divisional with box 15 completed)

- i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named
in the prior application, see 37 C.F.R. §1.63(d)(2) and
1.33(b).

5. ☐ Incorporation By Reference (usable if box 4B is checked)
The entire disclosure of the prior application, from which a copy of the
oath or declaration is supplied under Box 4B, is considered to be part
of the disclosure of the accompanying application and is hereby
incorporated by reference therein.

ACCOMPANYING APPLICATION PARTS

6. ☐ Assignment Papers (cover sheet & document(s))
7. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
8. ☐ English Translation Document (if applicable)
9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
10. ☐ Preliminary Amendment
11. ☒ White Advance Serial No. Postcard
12. ☐ Small Entity Statement(s) ☐ Statement filed in prior application. Status still proper and desired.
13. ☒ Certified Copy of Priority Document(s) (1)
(if foreign priority is claimed)
14. ☒ Other: Notice of Priority

15. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner:

Group Art Unit:

16. Amend the specification by inserting before the first line the sentence:

☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)
of application Serial No. Filed on

☐ This application claims priority of provisional application Serial No.

Filed

17. CORRESPONDENCE ADDRESS



22850

(703) 413-3000

FACSIMILE: (703) 413-2220

Name: Norman F. Oblon

Registration No.: 24,618

Signature:

C. Irvin McClelland

Date:

8/10/00

Name:

C. Irvin McClelland

Registration No.:

Registration Number 21,124

Docket No. 195617US0X

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

- INVENTOR(S) Sachiko MACHIDA, et al.

SERIAL NO: New Application

- FILING DATE: Herewith

FOR: ARTIFICIAL CHAPERON KIT

FEE TRANSMITTAL

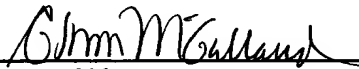
ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	8 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	4 - 3 =	1	× \$78 =	\$78.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$260 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$690.00
TOTAL OF ABOVE CALCULATIONS				\$768.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$768.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$768.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.
A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.



Norman F. Oblon
Registration No. 24,618

C. Irvin McClelland
Registration Number 21,124

Date: 8/10/00



22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 11/98)